Mailing Address 3003 YAMATO ROAD

BOCA RATON FL 33434

C-7

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000071949

1. Corporation Name

Principal Place of Business

3003 YAMATO ROAD

BOCA RATON FL 33434

REGENCY WOMAN, INC.

2. Principal Pl	ace of Business	2a. Mailing A	ddress				4. FEI Number	-	A	pplied For	
<u> </u>		26					65-0609468		N	ot Applicable	
Suite, Apt.	#, etc.	Suite, Ap	t. #, etc.				5. Certifcate of Status Desired			Additional equired	
City & State		City & St	ate				6. Election Campaign Financing		\$5.00	May Be	
3		28				1	Trust Fund Contribution			to Fees	
Zip	Country	Zip		Country			8. This corporation owes the cur	rent year Inta	ngible		
4	25 29 30						Personal Property Tax.		Yes	□No	
9. Name and Address of Current Registered Agent							10. Name and Address of New	Registered A	Agent		
					Name					1	
STEWART G. GREENBERG, P.A.					Street A	ddress	s (P.O. Box Number is Not Accept	able)			
7101 S.W. 102 AVENUE					82 Street Address (P.O. Box Number is Not Acceptable)						
MIAMI FL 33173					·						
					Cib				85 Zip	Code	
	,			84	City			FL	63 2.5	0000	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable.	(NOTE: Regi	stered Agent	signature rec	quired wi	nen reinstating)	DATE			
12.	OFFICERS AND	DIRECTORS	/	13.			ADDITIONS/CHANGES TO OF	FICERS AN			
TITLE	DP	8	DELETE	1.1 TITLE					Change	☐ Addition	
NAME	KING, MAXINE		ľ	1.2 NAME						ì	
STREET ADDRESS	DRESS 1074 KANE CONCOURSE 1.3			1.3 STREET	ADDRESS					ľ	
CITY-ST-ZIP	BAY HARBOR ISLAND FL 33154		i	1.4 CITY-ST	-ZIP						
TITLE	V		DELETE	2.1 TITLE		DIF	PIV		Change	☐ Addition	
NAME	BERMAN, BARBARA			2.2 NAME		RE	RMAN BARBARA				
STREET ADDRESS	1074 KANE CONCOURSE		j	2.3 STREET	ADDRESS	2.76	SE FALL RIVER A	DA -		}	
CITY-ST-ZIP	BAY HARBOR ISLAND FL 33154		ľ	2. 4 CITY- S1	r-ZIP	B	OCA RATON, FL	. 3342	ہ ع	•	
TITLE	T			3.1 TITLE		7/	<u>′</u> S		Change	☐ Addition	
NAME	BERMAN, BRUCE			3.2 NAME	1	BE	RMAN BRUCE 186 FALL RIVER CA RATON, FL.				
STREET ADDRESS	1074 KANE CONCOURSE			3.3 STREET	ADDRESS	2/1	CG FALL RIVE	n Dr.			
CITY-ST-ZIP	BAY HARBOR ISLAND FL 33154		_	3.4. CITY- S1	- 1	12.	CA RATON FL.	33428	' حست		
TITLE	\$		DELETE	4.1 TITLE	1				Change	Addition	
NAME	KING. SCOTT		'	4. 2 NAME							
STREET ADDRESS	1074 KANE CONCOURSE			4.3 STREET	ADDRESS					į	
CITY-ST-ZIP	BAY HARBOR ISLAND FL 33154	,		4.4 CITY-ST	ļ						
TITLE	Distribution in the Color		DELETE	5.1 TITLE					Change	Addition	
NAME				5.2 NAME				•		ļ	
STREET ADDRESS				5.3 STREET	ADDRESS						
CITY-ST-ZIP				5 4 CITY-ST	r-ZIP		*			·	
TITLE			DELETE	6.1 TITLE	-				Change	☐ Addition	
NAME		•		6.2 NAME			-				
STREET ADDRESS			-	6.3 STREET	ADDRESS		•	•			
				6 4 CITY-ST	-ZIP						
CITY-ST-ZIP	certify that the information supplied with	this filing does	not qualify for the	exempti	on stated	in Sec	ction 119.07(3)(i), Florida Statutes	I further cer	tify that the	information	
indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.											

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90078 003 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

09/18/1995